## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Feb 13, 2002 8:00 am Secretary of State DOCUMENT # F96000006001 1. Entity Name 02-13-2002 90138 038 \*\*\*150.00 TEXAS ENERGY ENGINEERS, INC. Principal Place of Business Mailing Address **500 DALLAS STREET 500 DALLAS STREET** STE 3110 STE 3110 HOUSTON TX 77002 HOUSTON TX 77002 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For -2131533 74 C Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition TITI E ☐ Delete TITLE NAME NAME **DUTHU. DAVID** STREET ADDRESS STREET ADDRESS 500 DALLAS STREET SUITE 3110 CITY-ST-ZIP CITY-ST-7IP **HOUSTON TX 77002** ☐ Addition Change TITLE Delete TITLE NAME NAME CAMPBELL, GEORGE STREET ADDRESS STREET ADDRESS 3625 N HALL STREET STE 1300 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75219 ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME. ROME, RICHARD ---STREET ADDRESS STREET ADDRESS 3625 N HALL STREET STE 1300 LB-139 CITY-ST-ZIP CITY-ST-ZIP **DALLAS TX 75219** ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

01/25/02

Date

713.650.8866

Daytime Phone #

FILED